Under the Panerwork Reduction Act of no persons are required to respond to a col

Approv Patent and Tradema llection of information	KOGS		
Con	Complete if Known		
Number	10/608,333	•	
	06/30/2003		

680.00

Effective 2/08/2004.	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number
FEE TRANSMITTAL	Filing Date
For FY 2005	First Named Inver
[] A [] A	Examiner Name

RANATUNGE SOLOLA ▲ Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1626 680.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 102258.153 US2 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Wilmer Cutler Pickering Hale None Other (please identify) and Dorr LLP 08-0219 ✓ Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 100 250 200 130 65 Design 100 100 50 0 200 160 Plant 300 80 100 150 0 Reissue 300 150 500 600 300 250 0 **Provisional** 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** 50 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Multiple Dependent Claims **Total Claims Extra Claims** Fee (\$) Fee (\$) Fee Paid (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20 **Extra Claims** Fee (\$) Fee Paid (\$) Indep. Claims - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) **Total Sheets Extra Sheets** / 50 = 0 ____ (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY	 				
Signature	Beliele Ler	Registration No. (Attorney/Agent)	53,212	Telephon	ne 202-663-6029
Name (Print/Type)				Date	09/07/2006

Other: RCE and Petition for Extension of Time

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.